SCANNED DEC 1 5 2021

(Rev. January 2020)

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 2019

Department of the Treasury

For Paperwork Reduction Act Notice, see the separate instructions.

▶ Do not enter social security numbers on this form as it may be made public. Open to Public ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Inspection For the 2019 calendar year, or tax year beginning 2019, and ending 2/01 1/31 Check if applicable: C Name of organization Association for Investment in Popular Action Committees D Employer identification number Address change Doing business as 20-5516191 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Initial return 405 Vista Heights Road 510-232-2500 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return El Cerrito, CA 94530 392,300 F Name and address of principal officer: Paul Larudee, Treasurer H(a) is this a group return for subordinates? Yes V No. Application pending H(b) Are all subordinates included? Yes No 405 Vista Heights Road, El Cerrito, CA 94530 Tax-exempt status: √ 501(c)(3) □ 501(c) ( ີ 4947(a)(1) or 🏻 527( If "No," attach a list. (see instructions) Website: ▶ assinvpopactcom.org H(c) Group exemption number ▶ L Year of formation: 2006 M State of legal domicile: CA Part I 1 Briefly describe the organization's mission or most significant activities: We are an all volunteer membership organization established to help our community, regardless of religion, race or political beliefs, be aware of international human rights & Activities & Governance social justice issues that are key to sustainable world peace Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . . . 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) . . . . 6 Total unrelated business revenue from Part VIII, column (Q, line 12 ECEIVED 7a Net unrelated business taxable income from Form 990-T, line 39 7b Pror Year **Current Year** 27 20<del>20</del> ά Contributions and grants (Part VIII, line 1h). 171715 351607 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . .OGDEN 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e). 25398 40692 Total revenue-add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 197113 392299 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . . 64343 228914 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . . . Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 103916 123012 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 175785 351926 19 Revenue less expenses. Subtract line 18 from line 12 . 21328 40376 Balances **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 104182 106625 21 Total liabilities (Part X, line 26) . 22 Net assets or fund balances. Subtract line 21 from line 20 106625 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Date Here 21) TREXSURER/1/ Type or print name and title Print/Type preparer's name Date PTIN Preparer's signature Check I if **Paid** self-employed **Preparer** Firm's name Firm's EIN ▶ Use Only Firm's address ▶ Phone no. May the IRS discuss this return with the preparer shown above? (see instructions)

☐ No

Yes

Part	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
•	
	See Schedule O
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
•	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 351926 including grants of \$ 228914) (Revenue \$)
	Arranges and conducts educational and informational programs relating to human rights and social justice, particularly in the Middle
	East; publishes informative articles regarding human rights issues through a newsletter in which human rights observers and
	scholars discuss human rights and social justice topics related to the Middle East.
	***************************************
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
70	
	·····
	***************************************
4-	(Code: ) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
	•
4d	Other program services (Describe on Schedule O.)
<b>A</b> -	(Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses \$ 322614
444	10141 DEOUGHD SEIVICE EXUERSES = 327614

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Form 99	90 (2019)	7	14	<i>J</i> Page :
Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	<b>✓</b>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<b>✓</b>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>√</b>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	<b>√</b>	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	<b>✓</b>	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	<b>√</b>	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		✓
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<b>√</b>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	

Form **990** (2019)

Part	IV Checklist of Required Schedules (continued)			
			Yes	No
<b>22</b>	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	<	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		<u> </u>	l
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	L	✓
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		✓
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		<b>√</b>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<b>~</b>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		<b>√</b>
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		1
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<b>\</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<b>\</b>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38		<b>\</b>
Part	V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	<b> </b>		<u>.</u>
	reportable gaming (gambling) winnings to prize winners?	1c	i	l

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
èа	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	,	•	۸.
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		2.3	,
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
70	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		✓
b	If "Yes," enter the name of the foreign country ▶	,	,	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	3	، ا س	٠,
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>7</b>
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	<u> </u>		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓_
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		ļ.,
7	Organizations that may receive deductible contributions under section 170(c).	*	700.	1 2
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		<u>_</u>	
	and services provided to the payor?	7a		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		1
	required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year			<u>-</u>
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<b> </b> -
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		<b></b>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		; .
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8	$\vdash$	
9	Sponsoring organizations maintaining donor advised funds.			<u>  ``</u>
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:		,	<b> </b>
а	Initiation fees and capital contributions included on Part VIII, line 12			· o ~
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	*- `×	, 4	
11	Section 501(c)(12) organizations. Enter:	# i	,	
	Gross income from members or shareholders	-	7	٠٠.
b	Gross income from other sources (Do not net amounts due or paid to other sources	# F	٤.	
40 -	against amounts due or received from them.)	12a		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	128		<del>                                     </del>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]	ş	-	ا ،
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	2.	
	Note: See the instructions for additional information the organization must report on Schedule O.	% €	*	
	Enter the amount of reserves the organization is required to maintain by the states in which	<b>\$</b> -7	•	* .
	the organization is licensed to issue qualified health plans	4.5	7 -	, ,
	Enter the amount of reserves on hand	44-		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<b>-</b>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			l
	excess parachute payment(s) during the year?	15	ļ	<u> </u>
	If "Yes," see instructions and file Form 4720, Schedule N.	<u> </u>		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes." complete Form 4720, Schedule O.	1 ~	•l	ı .

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	and See in	for a struct	"No" tions.
•	Check if Schedule O contains a response or note to any line in this Part VI			
Secti	on A. Governing Body and Management	-		
		1	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 2			1
	If there are material differences in voting rights among members of the governing body, or		ļ	- 1
	if the governing body delegated broad authority to an executive committee or similar	1 1		1
	committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent .	1 1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		<del>_</del>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?.	3		<b>✓</b>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	i	<del></del>
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		<del></del>
6	Did the organization have members or stockholders?	6	i	<b>√</b>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			_
	stockholders, or persons other than the governing body?	7b		<b>✓</b>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:		_	
a	The governing body?	8a	<b>-</b>	
b	Each committee with authority to act on behalf of the governing body?	8b		✓_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9	ŀ	./
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		nde )	
occu	on B. Pollotos (This occition & Toqueste information about polloto for required by the informative or	1	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		<b>√</b>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		✓
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		<b>✓</b>
14	Did the organization have a written document retention and destruction policy?	14		<u>✓</u>
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		<b>✓</b>
b	Other officers or key employees of the organization	15b		<b>✓</b>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		l	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		<u> </u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		1	
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ none			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-1 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website	(Sect	ion 5	01(c)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict o and financial statements available to the public during the tax year.	finter	est p	olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	cords	<b>&gt;</b>	
	Paul Larudee, 405 Vista Heights Road, El Corrito, CA 94530 510-418-4485			

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

## Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor	r any relate	d org	aniz	atio	n c	ompe	nsa	ited any current	officer, director,	or trustee.
		·		((	C)					
(A)	(B)			Pos				(D)	(E)	(F)
Name and title	Average					than o		Reportable	Reportable	Estimated amount
	hours	office	r and			or/trust		compensation	compensation	of other
	per week (list any	오코	5	Q	\$	용표	7	from the organization	from related organizations	compensation from the
	hours for	흑호	<b>P</b>	Officer	Key employee	호물	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	related	ᅉᄛ	₫	*	픙	y st	٩	l`	, , , , , , , , , , , , , , , , , , ,	related organizations
	organizations	≒ ₹	<u>로</u>		<u>چ</u>	<u> </u>		1		
	below dotted line)	Individual trustee or director	Institutional trustee	ĺ	١٥	3				
	dottod tillo,	l °	69	l		Highest compensated employee				
<b>A</b>		<b></b> -	<del> </del>	$\vdash$	⊢	_ <u>a</u>				·
(1) Kamal Obeid		1								
President	0			$\vdash$	┢	<del></del>	-	0	0	0
(2) Paul Larudee	<b></b>	l								
Secretary & Treasurer	0	├			$\vdash$		┝	0	0	0
(3)	<b></b>		1							
(A)	<del> </del>	$\vdash$	$\vdash$	┝		-	$\vdash$			<u> </u>
(4)				ŀ						
(5)		<b></b>		$\vdash$	H		-			
(5)		1						Ì		
		<u> </u>		-	-					<del></del>
(6)	<b>}</b>					1		į		
(7)			$\vdash$	┢		<del> </del>	┢─			<del> </del>
(7)	}			ĺ						
(8)		$\vdash$	-	<del> </del>	-	$\vdash$	Н			
					İ					
(9)		├──	<del> </del>	├		$\vdash$				
	<b></b>			ŀ		1				
(10)			$\vdash$	$\vdash$	-		<del>                                     </del>			
(10)										
(11)	<del> </del>	_	$\vdash$	$\vdash$	<del>                                     </del>	<del> </del>				
<u>\</u>	<u></u>									
(12)			H	$\vdash$		<b></b>	-	<u> </u>		
<u></u>										
(13)		<del>                                     </del>	H	$\vdash$	$\vdash$	$\vdash$	<del>                                     </del>			
119)										
(14)			<del> </del>		-					
(1-7)		1								

Part	VII Section A. Officers, Directors, 1	rustees,	Key I	Emj	ploy	yee	s, an	d H	lighest Compe	nsated	Emplo	yees (continued)
						C)						
	(A)	(B)	(do n	ot ch		ntion more	e than c	one	(D)	(E)		(F)
	Name and trile	Average hours	box,	unles	ss pe	rson	s both	n an	Reportable compensation	Report compen		Estimated amount of other
		per week		_	1		tor/trust		from the	from re	lated	compensation
		(list any hours for	학	nsta	Officer	<b>§</b>	mp dgh	Former	organization (W-2/1099-MISC)	organiza (W-2/1099		from the organization and
		related	rection in		٩	am p	oy est c	<b>ē</b>	(***2 1035***100,	(***2) 1000	FIVITOU	related organizations
		organizations below	일	nal t		Key employee	ğ					
		dotted line)	Individual trustee or director	Institutional trustee		°	Ş.					
				ě			Highest compensated employee					
(15)												
(16)			ļ	H	$  \cdot  $	$\vdash$						
(17)				H	H	$\vdash$		_				
				$\sqcup$		$\vdash$		<u> </u>				
(19)												
(20)												
(21)							<del>                                     </del>					
(22)			<u> </u>	H	H	-		-				
					Щ	_	<u> </u>	<u> </u>				
(24)												
(25)												
1b	Subtotal	<u> </u>	<u></u> -	<u>.</u>	<u>.                                    </u>				ļ	L		
c	Total from continuation sheets to Part		n A					<b>•</b>				
d	Total (add lines 1b and 1c)							<u> </u>				
2	Total number of individuals (including but reportable compensation from the organi		i to th	iose	) list	ed a	above	) w∣	ho received more	e than \$1	00,000	of
												Yes No
3	Did the organization list any former of employee on line 1a? If "Yes," complete S	Schedule J	for su	uch	indi	ividu	ual					3 🗸
4	For any individual listed on line 1a, is the organization and related organizations individual											
5	Did any person listed on line 1a receive of for services rendered to the organization?									tion or inc	lividual	
Secti	on B. Independent Contractors	III 160, U	Onip	C16	3011	Cuc	lie o i	Ui s	ucn p <del>a</del> son .	<u>· · · · · · · · · · · · · · · · · · · </u>	• •	5 /
1	Complete this table for your five high	est comp	ensate	ed	inde	-Dei	ndent	co	ntractors that r	eceived	more t	than \$100,000 of
	compensation from the organization. Repo											
	(A) Name and business add	ress							(B) Description of serv	rices	(	(C) Compensation
	<del></del>	<del></del>										<del></del>
				_		_						
		· · · · · · · · · · · · · · · · · ·	· · · · ·					-		_,		
2	Total number of independent contractor received more than \$100,000 of compensations.	-	-					> th	ose listed abov	e) who	* }	

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Part	VIII	Check if Schedule O contains a re	enon	se or note to an	v line in this Pa	ert VIII		
		CHECK II Scriedule O Contains a re	эрог	ise of flote to all	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
छ छ	1a	Federated campaigns	1a				<u> </u>	
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
2 5	С	Fundraising events	1c					
fts,	đ	Related organizations	1d					
ig ig	е	Government grants (contributions)	1e					
ns, Sir	f	All other contributions, gifts, grants,						
ıtio		and similar amounts not included above	1f	351607				
έ€	g	Noncash contributions included in						
id di		lines 1a-1f	1g	\$				
g g	h	Total. Add lines 1a-1f		▶	351607		-	
				Business Code				
92	2a						<u></u>	
<u>∑</u> •	b							
gram Ser Revenue	С							
ame	đ							
Program Service Revenue	е							
بّ	f	All other program service revenue						
	g	Total. Add lines 2a-2f		<b>.</b> ▶				
	3	Investment income (including divident						
		other similar amounts)						
	4	Income from investment of tax-exen	•	· ·		<u> </u>		
	5	Royalties		<u> </u>		ļ		
		(i) Rea	<u> </u>	(ii) Personal				
	6a	Gross rents 6a		ļ		:		
	b	Less: rental expenses 6b						
	С	Rental income or (loss) 6c		<u> </u>				
	d							
	7a	Gross amount from (i) Securit	105	(ii) Other				
		sales of assets						
		other than inventory 7a						
evenue	b	Less: cost or other basis						
Ver		and sales expenses . 7b						
8	l -	Gain or (loss)						
ē	d	Net gain or (loss)	·	<u> </u>			<del> </del>	
Other R	8a	Gross income from fundraising	l					
		events (not including \$ 40,692. of contributions reported on line						
		1c). See Part IV, line 18	8a					
	ь	Less: direct expenses	8b	37,931		į		
	C	Net income or (loss) from fundraisin			2761			
	9a	Gross income from gaming	1		2101			
	Ja	activities. See Part IV, line 19 .	9a			1		
	ь	Less: direct expenses	9b					
	c	Net income or (loss) from gaming a		× ▶	***		, <u>, , , , , , , , , , , , , , , , , , </u>	
		Gross sales of inventory, less						
		returns and allowances	10a					
	ь	Less: cost of goods sold	10b		: !			
	C	Net income or (loss) from sales of in		ory <b>&gt;</b>				
S				Business Code	-			
Miscellaneous Revenue	11a						· · · · · · · · · · · · · · · · · · ·	
scellaneo Revenue	b	***************************************						
₩ ₩	С							
<u> </u>	d	All other revenue						
Σ	e	Total. Add lines 11a-11d		•				
	12	Total revenue See instructions			254260			

# Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. A	All other organizations must complete column (A).
Charle if Sahadula O contains a response or note to any li	no in this Dort IV

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.  1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .  2 Grants and other assistance to domestic individuals. See Part IV, line 22  3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16  4 Benefits paid to or for members  5 Compensation of current officers, directors, trustees, and key employees  6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and	(D) Fundraising expenses
and domestic governments. See Part IV, line 21 . 58000 58000  2 Grants and other assistance to domestic individuals. See Part IV, line 22	
individuals. See Part IV, line 22	
organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16  4 Benefits paid to or for members  5 Compensation of current officers, directors, trustees, and key employees  6 Compensation not included above to disqualified	
4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above to disqualified	
5 Compensation of current officers, directors, trustees, and key employees	
trustees, and key employees	
persons described in section 4958(c)(3)(B)	The state of the s
7 Other salaries and wages	<b>└</b>
Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	
9 Other employee benefits	
10 Payroll taxes	<u> </u>
11 Fees for services (nonemployees):	
a     Management	1500
b Legal	<del> </del>
d Lobbying	
e Professional fundraising services. See Part IV, line 17	
f Investment management fees	
g Other. (If line 11g amount exceeds 10% of line 25, column	
(A) amount, list line 11g expenses on Schedule O.) . 8347 5347	3000
12 Advertising and promotion	
13 Office expenses	4000
14         Information technology           4576         4000	5000
15 Royalties	
16 Occupancy	<del> </del>
17 Travel	
for any federal, state, or local public officials	
19 Conferences, conventions, and meetings . 769 769	<del> </del>
20 Interest	<del> </del>
22 Depreciation, depletion, and amortization .	<u> </u>
23 Insurance	
24 Other expenses. Itemize expenses not covered	1
above (List miscellaneous expenses on line 24e. If	
line 24e amount exceeds 10% of line 25, column	
(A) amount, list line 24e expenses on Schedule O.)	
a Bank fees 138 88 50	
b Printing & copylng 5367 867 500	4000
c Donations/gifts 3327 3327	
d Dues & memberships 360 360	<del> </del>
e All other expenses	
25 Total functional expenses. Add lines 1 through 24e 351926 322614 11814 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs	17500
from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)	

Form	n 990 (20	019)			Page 11
Р	art X				
		Check if Schedule O contains a response or note to any line in this Par	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	82806	1	85249
	2	Savings and temporary cash investments	62800	2	03248
				3	
	3	Pledges and grants receivable, net		4	
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).		6	
Ø	7	Notes and loans receivable, net	'	7	
Assets	8	Inventories for sale or use	8950	8	© <del>995</del> 6-
Ą	9	Prepaid expenses and deferred charges		9	<u> </u>
_	1 . 1	Land, buildings, and equipment: cost or other			
	10a	basis. Complete Part VI of Schedule D 10a 12426			
		Less: accumulated depreciation	40400	100	
	l b		12426		<u>(*) 12426</u>
	11	Investments—publicly traded securities	······	11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	104182	16	106625
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
<u>=</u>		controlled entity or family member of any of these persons		22	
:≞	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	·
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		26	
ces		Organizations that follow FASB ASC 958, check here ▶ ☐ and complete lines 27, 28, 32, and 33.			
lar	27	Net assets without donor restrictions		27	
Ba	28	Net assets with donor restrictions		28	<del></del>
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here ▶ □			
Ē		and complete lines 29 through 33.			
S	29	Capital stock or trust principal, or current funds		29	
et	30	Paid-in or capital surplus, or land, building, or equipment fund	······	30	
458	31	Retained earnings, endowment, accumulated income, or other funds	104182		106625
et /	32	Total net assets or fund balances	104182		106625
Ž	33	Total liabilities and net assets/fund balances	104182	33	106625

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Page	1	2
rayo		_

Part	XI Reconciliation of Net Assets					<u> </u>
Par.						
<del></del>	Check if Schedule O contains a response or note to any line in this Part XI	1	<del>· · · ·</del>	<u>.</u>		
1	Total Total of the Control of the Co					<u>54369</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			3	<u>51926</u>
3	Revenue less expenses. Subtract line 2 from line 1	3				2443
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4				<u>82806</u>
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				21376
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	1				
	32, column (B))	10			1	<u>06625</u>
<b>Part</b>	XII Financial Statements and Reporting					
-	Check if Schedule O contains a response or note to any line in this Part XII		<u>.</u>	•		
					Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other		[			
	If the organization changed its method of accounting from a prior year or checked "Other," ex	cplain	in	- 1		
	Schedule O.		_ l_			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		. 2	2a		<b>✓</b>
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled	or 🗆			
	reviewed on a separate basis, consolidated basis, or both:	•				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		_			
b						<b>√</b>
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed o	n a 「			Ī
	separate basis, consolidated basis, or both:			ŀ		1
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					ĺ
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	rsiahi	t of	_		
	the audit, review, or compilation of its financial statements and selection of an independent accounta			2c		
	If the organization changed either its oversight process or selection process during the tax year, ex					
	Schedule O.			ļ		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in 1	the  -			
	Single Audit Act and OMB Circular A-133?			a l		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	erdo	· -			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a			ъ		
				<u>-</u>	000	(2010)

Form **990** (2019)

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service ▶ Go to www.irs.gov/Form990 for instructions and the latest information. **Inspection** Employer identification number Name of the organization **Association for Investment in Popular Action Committees** 20-5516191 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . Provide the following information about the supported organization(s). (i) Name of supported organization (v) Amount of monetary (ii) FIN (iii) Type of organization (iv) is the organization (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D)

(E) Total

	(Complete only if you checked the Part III. If the organization fails to						alify under
Secti	on A. Public Support			, <u>.</u> , <u></u>			
	dar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		(-,				
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						· · · · · · · · · · · · · · · · · · ·
	on B. Total Support					· · · · · · · · · · · · · · · · · · ·	
	dar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> ,2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
7	Amounts from line 4	ļ 					
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on /						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10	<b>建筑建筑</b>	MATCH A	No. of Part of Street,	沙兰艺兴	Man Mark	
12	Gross receipts from related activities, etc				· · · ·	12	
13	First five years. If the Form 990 is for the		n's first, secon	d, third, fourth	, or fifth tax y	ear as a sectio	n 501(c)(3)
<u> </u>	organization, check this box and stop he				·/· · ·	· · · ·	· · <b>&gt;</b> 🗆
Section	on C. Computation of Public Suppor					, , , , , , , , , , , , , , , , , , , ,	
14	Public support percentage for 2019 (line	• • • •		1, column (f))	/	14	<u> </u>
15	Public support percentage from 2018 Scl				: :/:	15	<u>%</u>
16a	331/3% support test—2019. If the organi				nd line 14 vs 33	31/3% or more,	
_	box and stop here. The organization qua	-		-	7 .		· · • 💆 📙
b	331/3% support test—2018. If the organithis box and stop here. The organization					is 331/3% or m∂ \ · · · · · ·	ore, check ▶ □
17a	10%-facts-and-circumstances test—2010% or more, and if the organization meets the "organization	eets the "facts	-and-circumsta	ances" test, ch	neck this box a	and stop here.	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization of Explain in Part VI how the organization of supported organization	ation meets th	e "facts-and-c	circumstances	" test, check	this box and s	a publicly
18	Private foundation. If the organization di	id not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	▶ [] see ▶ □

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

## Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

1 Giffs, grants, contributions, and membership fees received, from Initialization and membership fees received from Initialization and membership fees received from Initialization and	26CII	on A. Public Support	<del></del>	<del></del>				
Processed (Do not linclude any 'unusual grants-)   92750   138008   152719   171715   351607   908800	Calen		(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
2 Gross receipts from admissions, merchandise sold or servences performed, or facilities furnished in any activity that is related to the organization's face-energy purpose.  3 Gross receipts from activities that are not an unrelated trade or business where section 513  4 Tax revenues levied for the organization is that every purpose.  5 The value of services or facilities furnished by a governmental unit to the organization without charge.  6 Total, Add lines 1 through 5.  7a Amounts included on lines 1, 2, and 3 received from disqualified persons.  b Amounts included on lines 2 and 3 received from disqualified persons are ceived from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b.  8 Public support, (Subtract line 7c from line 6).  9 Section B. Total Support  2alendar year (or fiscal year beginning in) P (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total organization from line 6.  2 Add lines 10 and 10 b.  1 Net income from unleated business activities in Can from the sele of capital assets section 511 taxee) from businesses activities in Can for the sele of capital assets section 511 taxee) from businesses activities in the sele of capital assets section 51 three sele of capital assets (spinal in Part VI).  13 Total support, (Add lines 9, 10c, 11, and 12c).  14 First five years, if the Form 900 is for the organization's first, second, third, fourth, or fifth tax year as a section 5016(x) for the capital assets (comparation), check this box and stop here  Section D. Computation of Public Support Percentage  15 Public support percentage for 2019 fine 8, column (f), divided by line 13, column (f).  16 Public support percentage for 2019 fine 8, column (f), divided by line 13, column (f).  17 1 0 % 18 30% support tests—2019. If the organization id not check the box on line 14, and line 15 is more than 33%, etc. this box on did top to check the box on line 14, and line 15 is more than 33%, check this box and did not check the	1						ŀ	
sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempl purpose .  3 Gross receipts from activities that are not an unrelated trade or business under section 513  4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .  5 The value of services or facilities furnished by a governmental unit to the organization without charge .  6 Total. Add lines 1 through 5 .  7 A Amounts included on lines 1, 2, and 3 received from disqualified persons .  8 A mounts included on lines 2 and 3 received from disqualified persons .  9 Amounts included on lines 2 and 3 received from the than disqualified persons .  9 Authority of the amount on line 13 for the year .  C Add lines 7 a and 7 b.  9 Public support, (Subtract line 7c from line 6).  9 Amounts from line 6 .  9 Amounts from line 6 .  9 Amounts from line 6 .  9 Amounts received on securities loans, rents, noyalties, and income from small's source .  b Unrelated business taxable income (less saction 511 taxes) from businesses activities not included gain or loss from the sele of capital assets (Explain in Part VI).  10 Add lines 10 and 10 b.  11 Net income from unrelated business activities not included gain line 10b, whether or not the business is regularly carmed on 12 Other income. Do not include gain or loss from the sele of capital assets (Explain in Part VI).  13 Total support (Add lines 9, 10c, 11, and 12).  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501c(s) as 9 % Public support percentage from 2018 Schedule A, Part III, line 15.  15 By 30 % Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)).  18 Six/s% support percentage for 2019 (line 10c, column (f), divided by line 13, column (f)).  19 a 30 six/s support percentage fore 2018 Schedule A, Part III, line 15 .  10 Scitcion D. Computatio	_		92750	138009	152719	171715	351607	906800
3 Gross receipts from activities that are not an unrelated trade or busness under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	2	sold or services performed, or facilities furnished in any activity that is related to the						
organization's benefit and either paid to or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization without charge .  6 Total. Add lines 1 through 5 92750 138009 152719 171715 351607 906800  7a Amounts included on lines 1,2, and 3 received from disqualified persons  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c  c Add lines 7a and 7b  8 Public support. (Subtract line 7c from line 6) . 92750 138009 152719 171715 351607 906800  Section B. Total Support  Callerlar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 94 Amounts from line 6 92750 138009 152719 171715 351607 906800  9 Amounts from line 6 92750 138009 152719 171715 351607 906800  9 Amounts from line 6 92750 138009 152719 171715 351607 906800  10a Gross income from interest, dividends, payments received on securities loans, rents, reyalties, and income from smaller sources .  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b  1 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carmed on loss from the sale of capital assets (Explain in Part V) 18852 (3010) 20973 25398 2761 64984  13 Total support. (Add lines 9, 10c, 11, and 12) 11112 134999 173992 197113 334989 971784  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)) 15 93 94 95 92000 1970 1970 1970 1970 1970 1970 1970 1	3	Gross receipts from activities that are not an						
turnished by a governmental unit to the organization without charge	4	organization's benefit and either paid to						
Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year  c Add lines 7a and 7b  8 Public support. (Subtract line 7c from line 6.)	5	furnished by a governmental unit to the						
received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b.  8 Public support. (Subtract line 7c from line 6)		Amounts included on lines 1, 2, and 3	92750	138009	152719	171715	351607	906800
Public support. (Subtract line 7c from line 6.)	b	received from other than disqualified persons that exceed the greater of \$5,000						
Bine 6.) 906800 Section B. Total Support Calendar year (or fiscal year beginning in)   (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 9 Amounts from line 6	C							
Section B. Total Support  Calendar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total  9 Amounts from line 6	8							
Calendar year (or fiscal year beginning in)				1				906800
9 Amounts from line 6			(-) 0045 I	(h) 0046	(-) 0017	(4) 0010	(a) 2010 T	49 Total
Total support. (Add lines 9, 10c, 11, and 12.)		• • • • • •						
payments received on securities loans, rents, royalties, and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b	_		92730	136008	132/18	171713	331007	800000
section 511 taxes) from businesses acquired after June 30, 1975	104	aloss ficolite from filterest, dividends,						
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activities not included in line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	_	royalties, and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses		,				
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	b	royalties, and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
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First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	6 11	royalties, and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	18862		20973	25398	2761	64984
organization, check this box and stop here	6 11	royalties, and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  Total support. (Add lines 9, 10c, 11,		(3010)				
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33½% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33½%, and line 17 is not more than 33½%, check this box and stop here. The organization qualifies as a publicly supported organization . ▶ ✓	b c 11 12 13 14 Section 15 16	royalties, and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  Total support. (Add lines 9, 10c, 11, and 12.)	111612 le organization re t Percentage B, column (f), di nedule A, Part I come Percer	(3010) 134999 's first, second 	173692 d, third, fourth	197113 , or fifth tax ye	354368 ear as a section	971784 n 501(c)(3) ▶ □
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#### Part IV **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A. D. and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section	A.	All	Supporting	<b>Organizations</b>
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- Are all of the organization's supported organizations listed by name in the organization's governing 1 documents? If "No," describe in Part VI how the supported organizations are designated. If designated class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of state under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answ (b) and (c) below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) as satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how ti organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretic despite being controlled or supervised by or in connection with its supported organizations.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization use to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)( purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and E numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such actio (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the acti was accomplished (such as by amendment to the organizing document).
- Type I or Type II only. Was any added or substituted supported organization part of a class alread designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefite by one or more of its supported organizations, or (iii) other supporting organizations that also support benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contribut 7 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entities with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Was the organization controlled directly or indirectly at any time during the tax year by one or mo disqualified persons as defined in section 4946 (other than foundation managers and organizations describe in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal bene from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrate supporting organizations)? If "Yes," answer 10b below.
  - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, determine whether the organization had excess business holdings.)

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Part	IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			0
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		<u>\$</u>	
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		L
Secu	on B. Type I Supporting Organizations		Yes	No
_	Did the disseters twisters or membership of one or more connected organizations have the newer to	<b>*</b>	162	NO
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	ء ا		• `
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or		23	n d Maria
	controlled the organization's activities. If the organization had more than one supported organization,	. *		**
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	ر د	-	-
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported		· .1	-
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	, 4	. 4	9 4
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			نیا
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	1	, ^ -	40
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1_		L
Secti	on D. All Type III Supporting Organizations		14	r
_	The state of the s		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		-	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	-	,	ĺ.
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		. 9	7
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		* a	, p,
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	3	-	,
	significant voice in the organization's investment policies and in directing the use of the organization's	1		a,
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3 1		2 .
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	instru	ctions	s).
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	_		
C	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (	see in		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	4	, "	¥.= ^,
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes,	,	- <u> </u>	٠ -
	how the organization was responsive to those supported organizations, and how the organization determined	4,1		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			7
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the	, s		اد ۱
	reasons for the organization's position that its supported organization(s) would have engaged in these	5~		-
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	44-9		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		.4.	, , ,
_	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		• ,	
_	of its supported organizations? If "Yes." describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	an	zations		
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.				
Section A—Adjusted Net Income	.,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	(A) Prior Year	(B) Current Year (optional)	
1 Net short-term capital gain	1			
2 Recoveries of prior-year distributions	2			
3 Other gross income (see instructions)	3			
4 Add lines 1 through 3.	4	<u> </u>		
5 Depreciation and depletion	5			
6 Portion of operating expenses paid or incurred for production or				
collection of gross income or for management, conservation, or				
maintenance of property held for production of income (see instructions)	6			
7 Other expenses (see instructions)	7			
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Section B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):				
a Average monthly value of securities	1a			
b Average monthly cash balances	1b			
c Fair market value of other non-exempt-use assets	10			
d Total (add lines 1a, 1b, and 1c)	1d			
e Discount claimed for blockage or other				
factors (explain in detail in Part VI):				
2 Acquisition indebtedness applicable to non-exempt-use assets	2			
3 Subtract line 2 from line 1d.	3			
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4			
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6 Multiply line 5 by .035.	6		******	
7 Recoveries of prior-year distributions	7			
8 Minimum Asset Amount (add line 7 to line 6)	8			
Section C – Distributable Amount	•		Current Year	
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2 Enter 85% of line 1.	2			
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4 Enter greater of line 2 or line 3.	4			
5 Income tax imposed in prior year	5			
6 Distributable Amount. Subtract line 5 from line 4, unless subject to				
emergency temporary reduction (see instructions).	6		<u> </u>	
7 Check here if the current year is the organization's first as a non-functionall instructions)	y in	tegrated Type III supporti	ng organization (see	

Part	Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continued)	<u> </u>
Secti	on D—Distributions		· .	Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	sponsive	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on EDistribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6	るのでは、自然の対象		
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required - explain in Part VI). See			
•	instructions.		CONTRACTOR	
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
С	From 2016			
<u>d</u>	From 2017			
e	From 2018			
f	Total of lines 3a through e	THE STATE OF THE S		
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2019 distributable amount			
<del>!</del> -	Carryover from 2014 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	RECADE BOLES		
4	Distributions for 2019 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years  Applied to 2019 distributable amount			CAN SHEET WAS AND THE SHEET OF
<u>b</u>	Remainder. Subtract lines 4a and 4b from 4.			
<u>c</u> _			Service Westernaments Local Magazines	
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in <b>Part VI</b> . See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			Self- Color management Color Color Michigan Color Colo
Ο.	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			,
7	Excess distributions carryover to 2020. Add lines 3j	of service and an electric and the arrangement of services and services are services and services are services are services and services are service		
•	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2015			
b	Excess from 2016			THE RESIDENCE OF THE SECOND SE
С	Excess from 2017			
d	Excess from 2018			
	Excess from 2010			

Page	8
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Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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### **SCHEDULE F** (Form 990)

# **Statement of Activities Outside the United States**

OMB No. 1545-0047

2019

Open to Public

Department of the Treasury Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

vame of the organization				cut	noyer identification number
Association for Investment in Popular	Action Com	nittees			20-5516191
General Information Form 990, Part IV, line		ies Outside	the United States. Con	nplete if the organiza	tion answered "Yes" on
1 For grantmakers. Does the					
other assistance, the grante				selection criteria use	
award the grants or assistan	ce?				🗹 Yes 🗌 No
2 For grantmakers. Describe outside the United States.		-	•		nts and other assistance
3 Activities per Region. (The formula)	llowing Part	I, line 3 table o	an be duplicated if addition	nal space is needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in ( a program service, describe specific type service(s) in the region	expenditures for and investments
(1) UK	0	o	program services	inti human rights mor	nitorin 23039
M					
(2) Occupied Palestinian Territorie	0		program services	human rights	2500
(3) UK	0	0	grant to recipient	research/publishing	2525
(4) Occupied Palestinian Territorie	0	1	program services	human rights	8772
(5) Occupied Palestinian Territorie	0	0	program services	humanitarian aid	1452
		-			
(6) Russia	0	0	grant to recipient	research/publishing	10000
(7) Lebanon	0	0	grant to recipient	research/publishing	1041
(8)					
(9)	<del> </del>				
(10)					•
(11)					
(12)				······································	
(13)					
(14)					
		•			
(15)					
(16)					
(17)					
3a Subtotal					49329
<b>b</b> Total from continuation					
sheets to Part I					
c Totals (add lines 3a and 3b)				l	49329

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	
1)			UK	human rights monitor	23039	Electr funds transfer		+
2)			Occupied Palestine	human rights	8772	Electr funds transfer		4
3)			Russia	research/publishing	10000	Electr funds transfer		$\perp$
4)								$\perp$
5)								1
6)								
7)								
8)								
(9)								$\downarrow$
10)								$\downarrow$
1)	<del>1. 15</del>							$\downarrow$
12)			<u> </u>					$\downarrow$
13)								$\downarrow$
14)								$\downarrow$
15)								$\perp$
(16)	•				ļ			

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "
Part III can be duplicated if additional space is needed.

Part III can be dupl	icated if additional sp	ace is needed.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	of no
(1) Research/publishing	UK	1	2525	Electr funds transfe		
(2) Research/publishing	Lebanon	1	1041	Electr funds transfe		
(3)						
(4)						
(5)						
(6)						
(7)						
(8)					······································	
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(10)						
			_		······································	
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(12)				·		
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(14)						
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(16)						
(17)						
(18)						

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≥art	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Ye the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	ign	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization of the required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts at Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	nnd ha	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Ye the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect Certain Foreign Corporations (see Instructions for Form 5471)	to _	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company of qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 862 Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Election Fund (see Instructions for Form 8621)	21, ing	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Ye the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certa Foreign Partnerships (see Instructions for Form 8865)	ain	<b>☑</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year "Yes," the organization may be required to separately file Form 5713, International Boycott Report (s Instructions for Form 5713; don't file with Form 990)	see _	☑ No

## SCHEDULE I (Form 990)

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

Cat. No. 50055P

► Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury Internal Revenue Service Name of the organization

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

<b>Association for Investment in Popular</b>	<b>Action Committees</b>	3				
Part I General Information	on Grants and	Assistance				<del></del>
<ul> <li>Does the organization mainta</li> <li>the selection criteria used to</li> <li>Describe in Part IV the organ</li> </ul>	award the grants	or assistance?				for the grants or
2 Describe in Part IV the organ Part II Grants and Other As						if the organizat
Part IV, line 21, for an	ssistance to bu	received more the	nan \$5,000. Part	II can be duplica	ated if additional	space is need
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descript noncash ass
(1) MintPressNews						
3500 Vicksburg Ln#312,MplsMN5544	90-0737181		32000			
(2) Onward & Upward					1	
10734 17th Ave Ne, Seattle, WA 98125	821594584		6000			
(3) Venezuela Analysis, Inc. 3301 13th St. N, Arlington, VA 22201	27-0988701		10000			
(4)						
(5)						
(6)		·				
(7)				-		-
(8)						
(9)						
(10)				<del></del>		
(11)						<del></del>
(12)				<u> </u>		<u> </u>
2 Enter total number of section 3 Enter total number of other of				ine 1 table		

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book FMV, appraisal, other)
research/reporting/publishing	9	106500		
			<del>-</del>	
			······································	
	1			
onitor the production of grantees, receive rep	ports, and communicate w	ith them for answers to	questions that are n	
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	ports, and communicate w	ith them for answers to	questions that are n	

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

Association for Investment in Popular Action Committees	20-5516191
Form 990, Part III, Line 1 - Organization Mission	
The Association is an all volunteer membership organization established to help our community, regardless	ss of religion, race or political
beliefs, become more aware of international human rights and social justice issues that are the key to a su	stainable peace in the world.
Form 990, Part VI, Line 11b - Form Review Process	
No review was or will be performed. However all officers and corporate financial personnel receive a copy	of the submitted Return.
Form 990, Part Vi, Line 19 - Other Organization Documents Publicly Available	
The Association makes public all documents that are legally required to be public and sometimes others of	n a case by case basis.
Form 990, Part XI, Line 9 Other changes in net assets or fund balances.	
Credit of \$21376 = liquidation of vehicle \$12174 + liquidation of inventories \$8950	